

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>8/16/02</i>
O.I.P.E. CLASSIFIER		4	
FORMALITY REVIEW			7
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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